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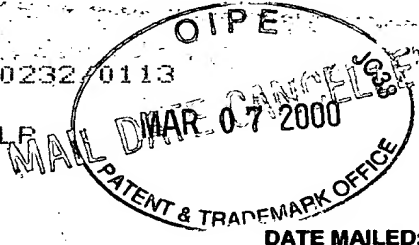
APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO./TITLE
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69/451,575 11/30/99 SIT

H ODSY-P004

JOHN C STATTER ESQ
STATTLER JOHANSEN & ADELI LLP
PO BOX 51860
PALO ALTO CA 94303-0728

0232 0113



NOT ASSIGNED

2721

DATE MAILED:

01/13/00

OIPE
MAR 06 2000
JC33

NOTICE TO FILE MISSING PARTS OF APPLICATION
Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given **TWO MONTHS** FROM THE DATE OF THIS NOTICE within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the **SURCHARGE** set forth in 37 CFR 1.16(e) of **\$65.00** for a small entity in compliance with 37 CFR 1.27, or **\$130.00** for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a
☐ small entity (statement filed) ☐ non-small entity is \$ 454

- ☒ 1. The statutory basic filing fee is:
☐ missing.
☐ insufficient.

Applicant must submit \$ 380 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).

- ☒ 2. The following additional claims fees are due:

\$ 9 for 1 total claims over 20.

\$ _____ for _____ independent claims over 3.

\$ _____ for multiple dependent claim surcharge.

Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.

- ☒ 3. The oath or declaration:

☒ is missing or unsigned.
☐ does not cover the newly submitted items.

An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.

- ☐ 4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.42, 1.43 or 1.47.

A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

- ☐ 5. The signature of the following joint inventor(s) is missing from the oath or declaration:

An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.

- ☐ 6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).

- ☐ 7. Your filing receipt was mailed in error because your check was returned without payment.

- ☐ 8. The application was filed in a language other than English.

Applicant must file a verified English translation of the application, the \$130.00 set forth in 37 CFR 1.17(k), unless previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).

- ☐ 9. OTHER:

Direct the reply and any questions about this notice to "Attention: Box Missing Parts."

A copy of this notice MUST be returned with the reply.

Customer Service Center
Initial Patent Examination Division (703) 308-1202

Please type a plus sign (+) inside this box →

+

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PTO/SB/21 (6-98) (modified)

Approved for use through 09/30/00. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

UIPE

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/451,575	
	Filing Date	November 30, 1999	
	First Named Inventor	Ho Wing Sit, et al	
	Group Art Unit	2721	
	Examiner Name	Not Assigned	
Total Number of Pages in This Submission	11	Attorney Docket Number	ODSY.P004

MAR 06 2000

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Enclosures (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Affidavits/declarations(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Assignment Papers/Assignment Recordation <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input checked="" type="checkbox"/> Small Entity Statement	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Request for Refund <input checked="" type="checkbox"/> Additional Enclosures: Return Receipt Postcard
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Or Individual name	Stattler, Johansen & Adeli
Signature	<i>John C. Stattler</i>
Date	Feb 29, '00

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Services as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:			
Typed or printed name	John C. Stattler		
Signature	<i>John C. Stattler</i>	Date	2/29/00

The fee (if any) has been calculated as follows:

FOR	CLAIMS ON FILE AFTER THIS AMENDMENT MINUS HIGHEST NUMBER PREVIOUSLY PAID FOR	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	21-20	1	x \$18.00	\$18.00
INDEPENDENT CLAIMS	3-3	0	x \$78.00	\$0
MULTIPLE DEPENDENT CLAIM(S) (if not previously paid for and presented for the first time) *			+ \$260.00	\$0
Basic Fee				\$760.00
Missing Parts Surcharge Fee				\$130.00
			TOTAL OF ABOVE CALCULATIONS =	\$908.00
Reduction by ½ for filing by small entity (Note 37 C.F.R. §§ 1.9, 1.27, 1.28).				\$454.00
			SUB TOTAL =	\$454.00
Assignment Recordation Fee				\$40.00
			TOTAL =	\$494.00

- ☒ The Assistant Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. §§ 1.16 and 1.17 that may be required by this transmittal and associated documents, or to credit any overpayment to **Deposit Account No 501128** referencing docket no. ODSY.P004

Respectfully submitted,

Dated: February 29, 2000

By:



John C. Stattler
Registration No. 36,285

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